

SCHOOL ENTRANCE, IMMUNIZATION AND SCREENING REQUIREMENTS

A. **The parents or guardian must present at the time of registration of their child in any school program evidence that their child is protected by adequate immunization against** (1) diphtheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella, hemophilus influenzae Type B; (2) hepatitis B and varicella, (3) hepatitis A, pneumococcal disease, influenza (flu) and meningococcal disease; and (4) by any other vaccines required by the schedule for active immunization adopted pursuant to §19a-7f of the Connecticut General Statutes or regulations adopted by the Department of Public Health and the State Department of Education before being permitted to attend such school program.

**Please note:** The requirements for immunization for hepatitis A and pneumococcal disease apply to students born on or after January 1, 2007 and enrolled in preschool or kindergarten. The requirement for immunization for meningococcal disease applies to students in the seventh grade. The requirement for immunization for influenza applies to pre-school students not less than twenty-four months and not more than fifty-nine months of age.

**Before being permitted to enter seventh grade,** a child shall (1) receive a second immunization against measles, (2) present evidence of having received two doses of varicella vaccine, (3) present evidence of having adequate immunization against meningococcal disease, and 4) present evidence of having received a diphtheria, tetanus and pertussis containing booster vaccine. In addition, all students in grades kindergarten through twelve must present evidence of having received a rubella and mumps containing booster vaccine.

Any child who (1) presents a physician's certificate stating the child has received initial immunizations and that additional immunizations are in the process of being administered under guidelines and schedules specified by the Department of Public Health; or (2) presents a certificate from a physician stating that in the opinion of such physician, immunizations are medically contraindicated because of the physical condition of the child; or (3) presents a statement from the parents or guardian that such immunization would be contrary to the religious beliefs of their child; or (4) in the case of measles, mumps or rubella, presents a physician's or town health director's certificate stating that the child has had a confirmed case of such disease; or (5) in the case of hemophilus influenzae Type B or pneumococcal disease, has passed his/her fifth birthday; or (6) in the case of pertussis, has passed his/her sixth birthday; or (7) in the case of measles, mumps, rubella, varicella, hepatitis B, or hepatitis A has had protection against the applicable disease confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on specific blood testing conducted by a certified laboratory; or (8) in the case of varicella, has a written statement signed and dated by a physician, physician assistant or advanced practice registered nurse indicating that the individual has already had varicella based on family and/or medical history, or (9) in the case of hemophilus influenzae Type B, had a natural laboratory confirmed infection with hemophilus influenzae Type B at age twenty-four months or older confirmed in writing by a physician, physician assistant or advanced practice registered nurse, shall be exempt from the appropriate provisions of this policy. If the parents or guardians of any children are unable to pay for such immunizations, the expense of such immunizations shall, on the recommendations of the Board of Education, be paid by the Town.

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**B. It is required that each child have a health assessment prior to public school enrollment.** The assessment shall include: (1) a physical examination including hematocrit or hemoglobin tests, height, weight and blood pressure, and a chronic disease assessment which shall include, but not be limited to, asthma; (2) an updating of immunizations as required by this policy, provided a registered nurse may only update said immunizations pursuant to a written order by a physician or licensed physician assistant, or a licensed advanced practice registered nurse; (3) vision, hearing, speech and gross dental screenings; and (4) such other information including health and development history, as the physician performing the assessment feels is necessary and appropriate. The assessment shall also include tests for tuberculosis, sickle cell anemia or Cooley's anemia and tests for lead levels in the blood where the Board determines after consultation with the school medical advisor and the local health department that such tests are necessary, provided a registered nurse may only update said immunizations pursuant to a written order by a physician or licensed physician assistant, or a licensed advanced practice registered nurse. The assessment form shall include (1) a check box for the provider conducting the assessment, to indicate an asthma diagnosis, (2) screening questions relating to appropriate public health concerns to be answered by the parent or guardian, and (3) screening questions to be answered by such provider.

**C. In addition, it is required that each child enrolled in the public schools have a health assessment in either grades six or prior to grade seven and in either grades nine or ten or prior to grade 11.** This assessment shall include: (1) a physical examination including hematocrit or hemoglobin tests, height, weight and blood pressure, and a chronic disease assessment which shall include, but not be limited to, asthma; (2) an updating of immunizations as required by this policy, provided a registered nurse may only update said immunizations pursuant to a written order by a physician or licensed physician assistant, or a licensed advanced practice registered nurse; (3) vision, hearing, postural and gross dental screenings; and (4) such other information, including a health history, as the physician performing the assessment feels is necessary and appropriate. The assessment shall also include tests for tuberculosis, sickle cell anemia or Cooley's anemia where the Board determines after consultation with the school medical advisor and the local health department that such tests are necessary, provided a registered nurse may only update said immunizations pursuant to a written order by a physician or licensed physician assistant, or a licensed advanced practice registered nurse. The assessment form shall include (1) a check box for the provider conducting the assessment, to indicate an asthma diagnosis, (2) screening questions relating to appropriate public health concerns to be answered by the parent or guardian, and (3) screening questions to be answered by such provider. The Board of Education shall provide for health assessments pursuant to this section without charge to all pupils whose parents or guardians meet the eligibility requirements for free and reduced price meals under the National School Lunch Program or for free milk under the special milk program. To meet its obligations pursuant to this section, the Board may utilize existing community resources and services.

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D. Consistent with and in addition to Section C of this Policy, the Board shall provide annually to each pupil in kindergarten, grades one through six, inclusive, and grade nine, a vision screening, using a Snellen chart, or equivalent screening. The Board shall also provide annually audiometric screening for hearing to each pupil in kindergarten to grade three, inclusive, grade five and grade eight. The Board shall also provide annual postural screenings for each pupil in grades five to nine. The Superintendent of Schools or his/her designee shall give written notice to the parent or guardian of each pupil who is found to have a defect, impairment, or disease by any of these screenings, with a brief statement describing any such defect, impairment or disease.

E. Nothing in Sections B, C, and D shall be construed to require any pupil to undergo a physical or medical examination or treatment, or to be compelled to receive medical instruction, if the parent or legal guardian of such pupil or the pupil, if such pupil is an emancipated minor or is eighteen years of age or older, in writing, notifies the teacher or principal or other person in charge of such pupil that such parent or guardian or pupil objects, on religious grounds, to such physical or medical examination or treatment or medical instruction.

F. Health assessments shall be conducted by a legally qualified practitioner of medicine, an advanced practice registered nurse or licensed registered nurse, a licensed physician assistant, or by the school medical adviser to ascertain whether such pupil is suffering from any physical disability tending to prevent such pupil from receiving the full benefit of school work and to ascertain whether such school work should be modified in order to prevent injury to the pupil or to secure for the pupil a suitable program of education. No health assessment shall be made of any child enrolled in the public schools unless such examination is made in the presence of the parent or guardian or in the presence of another school employee. The parent or guardian of such child shall receive prior written notice and shall have a reasonable opportunity to be present at such assessment or to provide for such assessment himself. The Board of Education may deny continued attendance in public school to any child who fails to obtain the health assessments required under this policy.

G. Children entering the Board's schools for the first time must present, at the time of registration, proof of age, evidence of legal residence, and must meet the requirements for immunization and health assessment as stated above.

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H. The results of each assessment and screening done pursuant to this policy shall be recorded on forms supplied by the State Board of Education. Such information shall be included in the cumulative health record of each pupil and shall be kept on file in the school such pupil attends. If a pupil permanently leaves the jurisdiction of the School District, the pupil's original cumulative health record shall be sent to the chief administrative officer of the school district to which such student moves. The School District shall retain a true copy. Each physician, advanced practice registered nurse, registered nurse, or physician assistant performing health assessments and screenings shall completely fill out and sign each form and any recommendations concerning the pupil shall be in writing.

I. Appropriate school health personnel shall review the results of each assessment and screening. When, in the judgment of such health personnel, a pupil is in need of further testing or treatment, the superintendent of schools or his/her designee shall give written notice to the parent or guardian of such pupil and shall make reasonable efforts to assure that such further testing or treatment is provided. Such reasonable efforts shall include a determination of whether or not the parent or guardian has obtained the necessary testing or treatment for the pupil, and, if not, advising the parent or guardian on how such testing or treatment may be obtained. The results of such further testing or treatment shall be recorded and shall be reviewed by school health personnel.

J. The Board of Education shall report, on an annual basis, the total number of pupils per school and per school district having a diagnosis of asthma recorded on such health assessment forms to the Connecticut State Department of Education. The report shall contain the asthma information collected as required under this policy and shall include pupil age, gender, race, ethnicity and school.

K. The Board of Education may require additional pre-school screening for initial entry and kindergarten enrollment, consistent with the law.

## Legal References:

Connecticut General Statutes §10-204a  
Connecticut General Statutes §10-205  
Connecticut General Statutes §10-206  
Connecticut General Statutes §10-206a  
Connecticut General Statutes §10-208  
Connecticut General Statutes §10-214  
Connecticut Agency Regulations §10-204a-2a (attached)

Connecticut Agency Regulations Sec. 10-204a-2a:  
Adequate immunization guidelines

(a) **Measles.** An individual shall be considered adequately protected against measles if that individual:

- (1) is enrolled in preschool and was immunized by use of one (1) dose of live attenuated measles vaccine on or after that individual's first birthday; or
- (2) on or after August 1, 2011, is enrolled in kindergarten through grade 12 and was immunized against measles by use of two (2) doses of a live attenuated measles vaccine given at least twenty-eight (28) days apart, the first on or after that individual's first birthday; or
- (3) has had protection against measles confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on specific blood testing by a certified laboratory.

(b) **Rubella.** An individual shall be considered adequately protected against rubella, if that individual:

- (1) is enrolled in preschool and was immunized by use of one (1) dose of live attenuated rubella vaccine on or after that individual's first birthday; or
- (2) on or after August 1, 2011, is enrolled in kindergarten through grade 12 and was immunized against rubella by use of two (2) doses of a live attenuated rubella vaccine given at least twenty-eight (28) days apart, the first on or after that individual's first birthday; or
- (3) has had protection against rubella confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on specific blood testing by a certified laboratory.

(c) **Poliomyelitis**

- (1) An individual eighteen (18) months of age or older shall be considered adequately protected against poliomyelitis if that individual has had a minimum of (3) doses of either trivalent oral polio vaccine (TOPV) or inactivated polio vaccine (IPV), two (2) doses of polio vaccine given at least four (4) weeks apart and a third dose given at least two (2) months after the previous dose.
- (2) For individuals enrolled in grades kindergarten through twelve (12) and at least forty-eight (48) months of age, at least one (1) dose of polio vaccine must be given on or after the fourth birthday.

(d) **Diphtheria, Tetanus, Pertussis**

- (1) An individual eighteen to eighty-three (18-83) months of age shall be considered adequately protected against diphtheria, tetanus and pertussis if such individual was immunized with a minimum of four (4) doses of diphtheria, tetanus, and pertussis containing vaccine, three (3) doses given at a minimum of four (4) week intervals followed by a fourth dose at least six (6) months after the third.
- (2) For individuals enrolled in grades kindergarten and above, at least one (1) dose of diphtheria, tetanus and pertussis containing vaccine must have been given on or after the fourth birthday.
- (3) An individual eighty-four (84) months of age or older shall be considered adequately protected if such individual was immunized with a minimum of two (2) doses of tetanus, diphtheria toxoid at a minimum of four (4) week intervals, followed by a third dose of tetanus, diphtheria toxoid at least six (6) months after the second dose.
- (4) On or after August 1, 2011, an individual eleven (11) years of age or older enrolled in the seventh grade shall show proof of one (1) dose of diphtheria, tetanus and pertussis containing vaccine in addition to completion of the recommended primary diphtheria, tetanus and pertussis containing vaccination series unless such individual has a medical exemption for this dose confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on having last received diphtheria, tetanus and pertussis containing vaccine less than five (5) years earlier and no increased risk of pertussis according to the most recent standards of care for immunizations in Connecticut as prescribed in section 19a-7f of the Connecticut General Statutes.

(e) **Mumps.** An individual shall be considered adequately protected against mumps if such individual:

- (1) is enrolled in preschool and was immunized by use of one (1) dose of live attenuated mumps vaccine on or after that individual's first birthday; or
- (2) on or after August 1, 2011, is enrolled in kindergarten through grade 12 and was immunized against mumps by use of two (2) doses of a live attenuated mumps vaccine given at least twenty-eight (28) days apart, the first on or after that individual's first birthday; or
- (3) has had protection against rubella confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on specific blood testing by a certified laboratory.

(f) **Hemophilus influenzae Type b (Hib).** An individual shall be considered adequately protected against Hib invasive disease if such individual:

- (1) was immunized before age five (5) years with a single dose of Hib vaccine given at age twelve (12) months or older, or
- (2) is currently age five (5) years or older, or
- (3) had a natural laboratory confirmed infection with hemophilus influenzae type b at age twenty-four (24) months or older confirmed in writing by a physician, physician assistant or advanced practice registered nurse.

(g) **Hepatitis B.** An individual shall be considered adequately protected against hepatitis B if such individual:

- (1) is enrolled in preschool through grade 12 and was immunized with three (3) doses of hepatitis B vaccine as follows: two (2) doses given at least four (4) weeks apart followed by a third dose at least sixteen (16) weeks after the first dose and at least eight (8) weeks after the second dose, and the third dose shall be given no earlier than twenty-four (24) weeks of age; or
- (2) has had protection against hepatitis B confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on specific blood testing by a certified laboratory.

(h) **Varicella.** An individual shall be considered adequately protected against varicella if that individual:

- (1) is enrolled in preschool and was immunized with one (1) dose of live attenuated varicella vaccine on or after that individual's first birthday; or
- (2) on or before July 31, 2011, is enrolled in kindergarten<sup>1</sup> through grade 12 and was immunized with one (1) dose of live attenuated varicella vaccine on or after that individual's first birthday; or
- (3) on or after August 1, 2011, is enrolled in kindergarten and was immunized against varicella by use of two (2) doses of live attenuated varicella vaccine given at least three (3) months apart, the first dose on or after that individual's first birthday; or
- (4) on or after August 1, 2011, is enrolled in seventh (7th) grade and was immunized with two doses of live attenuated varicella vaccine given at least three (3) months apart, the first dose on or after that individual's first birthday and before that individual's thirteenth birthday or two (2) doses of live attenuated varicella vaccine given at least twenty eight (28) days apart if the first dose was given on or after the individual's thirteenth birthday; or
- (5) on or after August 1, 2011, is enrolled in preschool or kindergarten and has a written statement signed and dated by a physician, physician assistant or advanced practice registered nurse indicating that the individual has already had varicella based on diagnosis of varicella or verification of history of varicella according to the most recent standards of care for immunizations in Connecticut as prescribed in section 19a-7f of the Connecticut General Statutes; or
- (6) has had protection against varicella confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on specific blood testing by a certified laboratory; or
- (7) has a written statement signed and dated by a physician, physician assistant or advanced practice registered nurse indicating that the individual has a history of herpes zoster; or

(8) is enrolled in seventh grade on or after August 1, 2011 and has a written statement signed and dated by a physician, physician assistant or advanced practice registered nurse indicating that the individual has already had varicella based on family or medical history.

(i) **Hepatitis A.** An individual shall be considered adequately protected against hepatitis A if that individual:

(1) was born on or after January 1, 2007, is enrolled in preschool or kindergarten on or after August 1, 2011, and was immunized with at least two (2) doses of hepatitis A virus vaccine given at least six (6) months apart, the first dose given on or after that individual's first birthday; or

(2) has had protection against hepatitis A confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on specific blood testing by a certified laboratory.

(j) **Pneumococcal disease.** An individual shall be considered adequately protected against pneumococcal disease if that individual:

(1) was born on or after January 1, 2007, is enrolled in preschool or kindergarten on or after August 1, 2011 and was immunized with one dose of pneumococcal conjugate vaccine on or after the individual's first birthday; or

(2) is currently age five (5) years or older.

(k) **Influenza (Flu).** On or after August 1, 2011, an individual enrolled in preschool shall be considered adequately protected against flu if that individual is not less than twenty-four (24) months and not more than fifty-nine (59) months of age and annually has received one (1) dose of flu vaccine between August 1st and December 31st except that individuals receiving flu vaccine for the first time must be given a second dose at least twenty-eight (28) days after the first dose.

(l) **Meningococcal disease.** An individual shall be considered adequately protected against meningococcal disease if that individual is enrolled in seventh (7<sup>th</sup>) grade on or after August 1, 2011 and was immunized with at least one dose of meningococcal vaccine.

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(Amended effective February 25, 2000; October 3, 2005; January 3, 2011.)